

**Recipient Committee  
Campaign Statement  
Cover Page**

|   |                                |
|---|--------------------------------|
| Date Stamp<br><b>CITY OF DALY CITY<br/>CITY CLERK</b><br><br>2016 SEP 27 A 10:48<br><br><b>RECEIVED</b> | <b>CALIFORNIA<br/>FORM 460</b> |
| Page <u>1</u> of <u>20</u>  |                                |
| For Official Use Only   |                                |

|  |  |
|--|--|
| Statement covers period<br>from <u>07/01/2016</u><br><br>through <u>09/24/2016</u> | Date of election if applicable:<br>(Month, Day, Year)<br><br><u>11/08/2016</u> |
|--|--|

SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

- |   |  |
|---|--|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="radio"/> State Candidate Election Committee<br><input type="radio"/> Recall<br><i>(Also Complete Part 5)</i>    | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="radio"/> Controlled<br><input type="radio"/> Sponsored<br><i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee<br><input type="radio"/> Sponsored<br><input type="radio"/> Small Contributor Committee<br><input type="radio"/> Political Party/Central Committee | <input checked="" type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i>   |

**2. Type of Statement:**

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Preelection Statement                                   | <input type="checkbox"/> Quarterly Statement     |
| <input type="checkbox"/> Semi-annual Statement  | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement<br><i>(Also file a Form 410 Termination)</i> |  |
| <input type="checkbox"/> Amendment (Explain below)  |  |

**3. Committee Information**

I.D. NUMBER  
1387618

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Sylvesterfordccouncil2016

STREET ADDRESS (NO P.O. BOX)

|                  |           |              |                 |
|------------------|-----------|--------------|-----------------|
| CITY             | STATE     | ZIP CODE     | AREA CODE/PHONE |
| <u>Daly City</u> | <u>CA</u> | <u>94014</u> |                 |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

|      |       |          |                 |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|      |       |          |                 |

OPTIONAL: FAX / E-MAIL ADDRESS

sylvesterfordccouncil2016@gmail.com

**Treasurer(s)**

NAME OF TREASURER

Deborah V. Van Patten

MAILING ADDRESS

|                      |           |              |                 |
|----------------------|-----------|--------------|-----------------|
| CITY                 | STATE     | ZIP CODE     | AREA CODE/PHONE |
| <u>San Francisco</u> | <u>CA</u> | <u>94117</u> |                 |

NAME OF ASSISTANT TREASURER, IF ANY

Glenn Sylvester

|                  |           |              |                 |
|------------------|-----------|--------------|-----------------|
| CITY             | STATE     | ZIP CODE     | AREA CODE/PHONE |
| <u>Daly City</u> | <u>CA</u> | <u>94014</u> |                 |

OPTIONAL: FAX / E-MAIL ADDRESS

sylvesterfordccouncil2016@gmail.com

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 09/26/2016  
Date

By \_\_\_\_\_

Treasurer

Executed on 09/26/2016  
Date

By \_\_\_\_\_

Agent or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_

Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Glenn R. Sylvester

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
Daly City Council

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
{ \_\_\_\_\_ Daly City , CA, 94014

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

|                   |   |
|-------------------|---|
| COMMITTEE NAME    | I.D. NUMBER   |
| NAME OF TREASURER | CONTROLLED COMMITTEE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |
| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX)  |
| CITY              | STATE ZIP CODE AREA CODE/PHONE  |

  

|                   |   |
|-------------------|---|
| COMMITTEE NAME    | I.D. NUMBER   |
| NAME OF TREASURER | CONTROLLED COMMITTEE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |
| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX)  |
| CITY              | STATE ZIP CODE AREA CODE/PHONE  |

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

|                      |              |   |
|----------------------|--------------|---|
| BALLOT NO. OR LETTER | JURISDICTION | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|----------------------|--------------|---|

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

|                       |                     |
|-----------------------|---------------------|
| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |
|-----------------------|---------------------|

**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

|   |  |  |
|---|--|--|
| NAME OF OFFICEHOLDER OR CANDIDATE<br>Glenn R. Sylvester | OFFICE SOUGHT OR HELD<br>Daly City Council | <input checked="" type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE                       | OFFICE SOUGHT OR HELD                      | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE            |
| NAME OF OFFICEHOLDER OR CANDIDATE                       | OFFICE SOUGHT OR HELD                      | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE            |
| NAME OF OFFICEHOLDER OR CANDIDATE                       | OFFICE SOUGHT OR HELD                      | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE            |

*Attach continuation sheets if necessary*

# Campaign Disclosure Statement Summary Page

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

|  |                            |
|--|----------------------------|
| Statement covers period<br>from 07/01/2016<br>through 09/24/2016 | <b>CALIFORNIA FORM 460</b> |
|  | Page <u>3</u> of <u>20</u> |
|  | I.D. NUMBER<br>1387618     |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sylvester for Daly City Council

## Contributions Received

|  | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|--|--|--|
| 1. Monetary Contributions..... Schedule A, Line 3    | \$ 14,279  | \$ 14,279                                  |
| 2. Loans Received..... Schedule B, Line 3            | \$ 4,000   | \$ 4,000                                   |
| 3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2  | \$ 18,279  | \$ 18,279                                  |
| 4. Nonmonetary Contributions..... Schedule C, Line 3 | \$ 0   | \$ 0                                       |
| 5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4 | \$ 18,279  | \$ 18,279                                  |

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

|                            | 1/1 through 6/30 | 7/1 to Date |
|----------------------------|------------------|-------------|
| 20. Contributions Received | \$ _____         | \$ _____    |
| 21. Expenditures Made      | \$ _____         | \$ _____    |

## Expenditures Made

|  | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|--|--|--|
| 6. Payments Made..... Schedule E, Line 4                   | \$ 2,046   | \$ 2,046                                   |
| 7. Loans Made..... Schedule H, Line 3                      | \$ 0   | \$ 0                                       |
| 8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7             | \$ 2,046   | \$ 2,046                                   |
| 9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3 | \$ 4,820   | \$ 4,820                                   |
| 10. Nonmonetary Adjustment..... Schedule C, Line 3         | \$ 0   | \$ 0                                       |
| 11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10      | \$ 6,866   | \$ 6,866                                   |

## Expenditure Limit Summary for State Candidates

| 22. Cumulative Expenditures Made*<br>(If Subject to Voluntary Expenditure Limit) |               |
|--|---------------|
| Date of Election<br>(mm/dd/yy)   | Total to Date |
| ____/____/____   | \$ _____      |
| ____/____/____   | \$ _____      |

## Current Cash Statement

|  |           |
|--|-----------|
| 12. Beginning Cash Balance..... Previous Summary Page, Line 16             | \$ 0      |
| 13. Cash Receipts..... Column A, Line 3 above                              | \$ 18,279 |
| 14. Miscellaneous Increases to Cash..... Schedule I, Line 4                | \$ 0      |
| 15. Cash Payments..... Column A, Line 8 above                              | \$ 2,046  |
| 16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 16,233 |

If this is a termination statement, Line 16 must be zero.

|  |        |
|--|--------|
| 17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 | \$ N/A |
|--|--------|

## Cash Equivalents and Outstanding Debts

|  |        |
|--|--------|
| 18. Cash Equivalents..... See instructions on reverse            | \$ N/A |
| 19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above | \$ N/A |

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

|  |                            |
|--|----------------------------|
| Statement covers period<br>from <u>07/01/2016</u><br>through <u>09/24/2016</u> | <b>CALIFORNIA FORM 460</b> |
|  | Page <u>4</u> of <u>20</u> |
| I.D. NUMBER<br><b>1387618</b>  |                            |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sylvester for Daly City Council

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 08/17/2016         | Kitt Crenshaw<br>Henderson, NV 89011   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired  | 100                         |   |                                    |
| 08/17/2016         | John Mambretti<br>Walnut Creek, CA 94578   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired  | 100                         |   |                                    |
| 08/23/2016         | Henry Friedlander<br>Redwood City, CA  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired  | 250                         |   |                                    |
| 08/23/2016         | Tom Shawyer<br>San Francisco, CA 94110   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Law Enforcement<br>SF District Attorney's Office   | 250                         |   |                                    |
| 08/24/2016         | Mel Bautista<br>San Francisco, CA 94131  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired  | 100                         |   |                                    |
| <b>SUBTOTAL \$</b> |  |   |  | <b>800</b>                  |   |                                    |

**Schedule A Summary**

|  |                 |               |
|--|-----------------|---------------|
| 1. Amount received this period – itemized monetary contributions.<br>(Include all Schedule A subtotals.) .....                           | \$              | 13,301        |
| 2. Amount received this period – unitemized monetary contributions of less than \$100 .....  | \$              | 978           |
| 3. Total monetary contributions received this period.<br>(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)..... | <b>TOTAL \$</b> | <b>14,279</b> |

\*Contributor Codes  
 IND – Individual  
 COM – Recipient Committee  
       (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|                                 |            |                            |
|---------------------------------|------------|----------------------------|
| Statement covers period         |            | <b>CALIFORNIA FORM 460</b> |
| from                            | 07/01/2016 |                            |
| through                         | 09/24/2016 | Page <u>5</u> of <u>20</u> |
| NAME OF FILER                   |            | I.D. NUMBER                |
| Sylvester for Daly City Council |            | 1387618                    |

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|---------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/08/2016    | Krvstalvn Wells<br>San Mateo, CA 94403  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Software Engineer<br>Lockheed Martin  | 250                         |  |                                       |
| 09/08/2016    | Holly Pera<br>Burlingame, CA 94010  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Law Enforcement<br>CCSF   | 100                         |  |                                       |
| 09/09/2016    | Farrell Suslow<br>Foster City, CA 94404   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 250                         |  |                                       |
| 09/09/2016    | Garv Cadaan<br>Union City, CA 94581   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 251                         |  |                                       |
| 09/09/2016    | SF Police Officers Association-PAC<br>525 Capitol Mall 1425<br>Sacramento, CA 95814             | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | PAC ID ##1315969  | 500                         |  |                                       |

**SUBTOTAL \$ 1,351**

\*Contributor Codes  
 IND - Individual  
 COM - Recipient Committee  
 (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|                                 |            |                                |
|---------------------------------|------------|--------------------------------|
| Statement covers period         |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                            | 07/01/2016 |                                |
| through                         | 09/24/2016 | Page <u>6</u> of <u>20</u>     |
| NAME OF FILER                   |            | I.D. NUMBER                    |
| Sylvester for Daly City Council |            | 1387618                        |

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/01/2016         | Deborah Van Patten<br>San Francisco, CA 94117   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 200                         |  |                                       |
| 09/02/2016         | Ronald Artale<br>Concord, CA 94521  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         |  |                                       |
| 09/07/2016         | Andy Omahoney<br>SF., CA 94112  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 300                         |  |                                       |
| 09/07/2016         | Jane Kim<br>SF., CA 94103   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Supervisor<br>CCSF  | 200                         |  |                                       |
| 09/07/2016         | Kimberly Wong<br>Belmont, CA 94002  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Criminalist<br>CCSF   | 250                         |  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | <b>1,050</b>                |  |                                       |

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 IND - Individual  
 COM - Recipient Committee  
       (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
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 SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|  |  |                                |
|--|--|--------------------------------|
| Statement covers period<br>from <u>07/01/2016</u><br>through <u>09/24/2016</u> |  | <b>CALIFORNIA<br/>FORM 460</b> |
|  |  |                                |
| NAME OF FILER<br><b>Sylvester for Daly City Council</b>                        |  | I.D. NUMBER<br><b>1387618</b>  |

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/01/2016         | Carlos Bolanes<br>Redwood City, CA 94063  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Sheriff<br>San Mateo County   | 250                         |  |                                       |
| 09/01/2016         | Darlene Hong<br>San Francisco, CA 94123   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | VP Business<br>Development<br>SF Police CU  | 100                         |  |                                       |
| 09/01/2016         | Divina Videna<br>SF, CA 94105   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Sales Representative<br>Uber  | 100                         |  |                                       |
| 09/02/2016         | Lerov Lindo<br>SF, CA 94112   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 250                         |  |                                       |
| 09/02/2016         | Louis & Beth Espinda<br>Daly City, Ca 94015   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         |  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | <b>800</b>                  |  |                                       |

\*Contributor Codes  
 IND – Individual  
 COM – Recipient Committee  
       (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|                                 |            |                            |
|---------------------------------|------------|----------------------------|
| Statement covers period         |            | <b>CALIFORNIA FORM 460</b> |
| from                            | 07/01/2016 |                            |
| through                         | 09/24/2016 | Page <u>8</u> of <u>20</u> |
| NAME OF FILER                   |            | I.D. NUMBER                |
| Sylvester for Daly City Council |            | 1387618                    |

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|---------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/01/2016    | Duggan's Sierra Mortuary<br>500 Westlake Ave<br>Daly City, CA 94014                             | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 250                         |  |                                       |
| 09/01/2016    | Brad Bautista<br>Vallejo, Ca 94591  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Law Enforcement<br>CA DOJ   | 100                         |  |                                       |
| 09/01/2016    | Eric Quema<br>Pinole, CA 94564  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         |  |                                       |
| 09/01/2016    | Nida Sylvester<br>Daly City, CA 94014   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 300                         |  |                                       |
| 09/01/2016    | Mission Plaza Dental<br>Daly City, CA 94014   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 250                         |  |                                       |

**SUBTOTAL \$ 1,000**

\*Contributor Codes  
 IND - Individual  
 COM - Recipient Committee  
       (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|                                 |            |                            |
|---------------------------------|------------|----------------------------|
| Statement covers period         |            | <b>CALIFORNIA FORM 460</b> |
| from                            | 07/01/2016 |                            |
| through                         | 09/24/2016 | Page <u>9</u> of <u>10</u> |
| NAME OF FILER                   |            | I.D. NUMBER                |
| Sylvester for Daly City Council |            | 1387618                    |

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/01/2016         | Juslyn Manalo<br>Daly City, CA 94014  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Community Engagement Associate<br>Forrest City Realty   | 100                         |  |                                       |
| 09/01/2016         | Raymond Buenaventura<br>Daly City, CA 94015   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Attorney<br>Buenaventura Law Firm   | 250                         |  |                                       |
| 09/01/2016         | Ken & Stephanie Esposto<br>San Rafael, CA 94903   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 200                         |  |                                       |
| 09/01/2016         | Lily Louie<br>Daly City, CA 94016   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         |  |                                       |
| 09/01/2016         | Karla Rodriguez<br>Daly City, CA 94014  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Purchaser<br>Macy   | 100                         |  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | <b>750</b>                  |  |                                       |

\*Contributor Codes  
 IND - Individual  
 COM - Recipient Committee  
       (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|                         |            |                             |
|-------------------------|------------|-----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b>  |
| from                    | 07/01/2016 |                             |
| through                 | 09/24/2016 | Page <u>10</u> of <u>20</u> |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Sylvester for Daly City Council | I.D. NUMBER<br>1387618 |
|--|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|---------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/31/2016    | Marv Strong<br>Daly City, CA 94015  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         |  |                                       |
| 08/30/2016    | Tom Strong<br>Daly City, CA 94015   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         |  |                                       |
| 09/01/2016    | Patricia & Theresa Motassia<br>San Carlos, CA 94070   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Security Investigator<br>Amtrak   | 200                         |  |                                       |
| 09/01/2016    | Rowena Nozik<br>So. SF., CA 94080   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Nurse<br>CCSF   | 150                         |  |                                       |
| 09/01/2016    | Agnes Alvarez<br>So. SF., CA 94080  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         |  |                                       |

|                    |  |  |  |     |  |  |
|--------------------|--|--|--|-----|--|--|
| <b>SUBTOTAL \$</b> |  |  |  | 650 |  |  |
|--------------------|--|--|--|-----|--|--|

\*Contributor Codes  
 IND – Individual  
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       (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|  |  |                                |
|--|--|--------------------------------|
| Statement covers period<br>from <u>07/01/2016</u><br>through <u>09/24/2016</u> |  | <b>CALIFORNIA<br/>FORM 460</b> |
|  |  |                                |
| NAME OF FILER<br>Sylvester for Daly City Council                               |  | I.D. NUMBER<br>1387618         |

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/24/2016         | Geary Terrace North LLC<br>Millbrae, CA 94030   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 1,000                       |  |                                       |
| 08/24/2016         | Geary Terrace North LLC<br>Millbrae, CA 94030   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 1,000                       |  |                                       |
| 08/24/2016         | Judah Terraces LLC<br>Millbrae, CA 94030  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 1,000                       |  |                                       |
| 08/25/2016         | Juan Raigoza<br>Redwood City, CA 94662  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 100                         |  |                                       |
| 08/31/2016         | Rich Corriea<br>San Francisco, CA 94121   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 150                         |  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | <b>3,250</b>                |  |                                       |

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       (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|                                 |            |                             |
|---------------------------------|------------|-----------------------------|
| Statement covers period         |            | <b>CALIFORNIA FORM 460</b>  |
| from                            | 07/01/2016 |                             |
| through                         | 09/24/2016 | Page <u>12</u> of <u>20</u> |
| NAME OF FILER                   |            | I.D. NUMBER                 |
| Sylvester for Daly City Council |            | 1387618                     |

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/13/2016         | Eddie Young<br>So. SF., CA 94080  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | CEO<br>SF Police Credit Union   | 250                         |  |                                       |
| 09/19/2016         | Curtis Lum<br>Pacifica, CA 94044  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Law Enforcement<br>CCSF   | 100                         |  |                                       |
| 09/21/2016         | Romero Soriben<br>So. SF., CA 94080   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         |  |                                       |
| 09/21/2016         | Jonathan Sylvester<br>Daly City, CA 94014   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Law Enforcement<br>CCSF   | 250                         |  |                                       |
| 09/21/2016         | Richard Hessselroth<br>Daly City, CA 94015  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 200                         |  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | <b>900</b>                  |  |                                       |

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       (other than PTY or SCC)  
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 PTY – Political Party  
 SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|  |                             |
|--|-----------------------------|
| Statement covers period<br>from <u>07/01/2016</u><br>through <u>09/24/2016</u> | <b>CALIFORNIA FORM 460</b>  |
|  | Page <u>13</u> of <u>10</u> |

|   |                               |
|---|-------------------------------|
| NAME OF FILER<br><b>Sylvester for Daly City Council</b> | I.D. NUMBER<br><b>1387618</b> |
|---|-------------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 09/14/2016         | AGH Realtv Group<br>Millbrae, CA 94030   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | 450                         |   |                                    |
| 09/12/2016         | Norma Soriben<br>Vallejo, CA 94591   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired  | 100                         |   |                                    |
| 09/11/2016         | Tomasito Birco<br>So. SF., CA 94080  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired  | 100                         |   |                                    |
| 09/01/2016         | Ralph Kugler<br>SF., CA 94115  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired  | 100                         |   |                                    |
| 09/01/2016         | Jason Sylvester<br>Daly City, CA 94010S  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Dispatcher<br>CCSF   | 250                         |   |                                    |
| <b>SUBTOTAL \$</b> |  |   |  | <b>1,000</b>                |   |                                    |

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 (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|                         |            |                             |
|-------------------------|------------|-----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b>  |
| from                    | 07/01/2016 |                             |
| through                 | 09/24/2016 | Page <u>14</u> of <u>20</u> |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Sylvester for Daly City Council | I.D. NUMBER<br>1387618 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|---|------------------------------------|
| 09/13/2016         | Judith Riggle<br>SF., CA 94116  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         |   |                                    |
| 09/13/2016         | Robert Belous<br>Redwood City, CA 94061   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         |   |                                    |
| 09/14/2016         | Millbrae Paradise LLC<br>9<br>Millbrae, CA 94030  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 500                         |   |                                    |
| 09/14/2016         | Van Ness Terraces LLC<br>Millbrae, CA 94030   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 500                         |   |                                    |
| 09/14/2016         | Hillsdale Terraces LLC<br>Millbrae, CA 94030  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 550                         |   |                                    |
| <b>SUBTOTAL \$</b> |   |   |   | <b>1,750</b>                |   |                                    |

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       (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

**Schedule B – Part 1  
Loans Received**

Amounts may be rounded  
to whole dollars.

|  |                             |
|--|-----------------------------|
| Statement covers period<br>from <u>07/01/2016</u><br>through <u>09/24/2016</u> | <b>CALIFORNIA FORM 460</b>  |
|  | Page <u>15</u> of <u>20</u> |

SEE INSTRUCTIONS ON REVERSE

|  |                            |
|--|----------------------------|
| NAME OF FILER<br><br>Sylvester for Daly City Council | I.D. NUMBER<br><br>1387618 |
|--|----------------------------|

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b) AMOUNT RECEIVED THIS PERIOD | (c) AMOUNT PAID OR FORGIVEN THIS PERIOD*   | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e) INTEREST PAID THIS PERIOD   | (f) ORIGINAL AMOUNT OF LOAN                            | (g) CUMULATIVE CONTRIBUTIONS TO DATE                    |
|---|--|---|---------------------------------|--|---|---------------------------------|--|---|
| Glenn Sylvester<br>Daly City, CA 94014<br>† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired  | \$ _____                                      | \$ <u>2000</u>                  | <input type="checkbox"/> PAID<br>\$ _____<br><input type="checkbox"/> FORGIVEN<br>\$ _____ | \$ <u>2000</u><br><br>n/a<br>DATE DUE           | _____%<br>RATE<br>\$ <u>n/a</u> | \$ <u>2000</u><br><br><u>07/20/16</u><br>DATE INCURRED | CALENDAR YEAR<br>\$ _____<br>PER ELECTION**<br>\$ _____ |
| Glenn Sylvester<br>Daly City, CA 94014<br>† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired  | \$ _____                                      | \$ <u>2000</u>                  | <input type="checkbox"/> PAID<br>\$ _____<br><input type="checkbox"/> FORGIVEN<br>\$ _____ | \$ <u>2000</u><br><br>n/a<br>DATE DUE           | _____%<br>RATE<br>\$ <u>n/a</u> | \$ <u>2000</u><br><br><u>08/15/16</u><br>DATE INCURRED | CALENDAR YEAR<br>\$ _____<br>PER ELECTION**<br>\$ _____ |
| <br><br>† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC  |  | \$ _____                                      | \$ _____                        | <input type="checkbox"/> PAID<br>\$ _____<br><input type="checkbox"/> FORGIVEN<br>\$ _____ | \$ _____<br><br>DATE DUE                        | _____%<br>RATE<br>\$ _____      | \$ _____<br><br>DATE INCURRED                          | CALENDAR YEAR<br>\$ _____<br>PER ELECTION**<br>\$ _____ |

**SUBTOTALS \$ 4000 \$ \$ 4000 \$**

(Enter (e) on  
Schedule E, Line 3)

**Schedule B Summary**

- Loans received this period ..... \$ 4000  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 0  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET \$** 4000  
Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

†Contributor Codes  
IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other (e.g., business entity)  
PTY – Political Party  
SCC – Small Contributor Committee

\*Amounts forgiven or paid by another party also must be reported on Schedule A.  
\*\* If required.

**Schedule D  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Amounts may be rounded  
to whole dollars.

SCHEDULE D

|  |                             |
|--|-----------------------------|
| Statement covers period<br>from <u>07/01/2016</u><br>through <u>09/24/2016</u> | <b>CALIFORNIA FORM 460</b>  |
|  | Page <u>14</u> of <u>20</u> |
| I.D. NUMBER<br>1387618   |                             |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sylvester for Daly City Council

| DATE               | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE   | TYPE OF PAYMENT  | DESCRIPTION (IF REQUIRED)                                  | AMOUNT THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|--|--|--------------------|---|------------------------------------|
| 09/23/2016         | Friends of Filipino American Community PAC<br><br><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                 | <input checked="" type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure | FPPC# 1277359<br>1557 Larkwood Court<br>Milpitas, CA 95035 | 150                |   |                                    |
| 09/24/2016         | Yes on Measure "T" / Daly City Quality Elementary Schools for all Students<br><br><input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input checked="" type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure | FPPC# 1390471<br>P.O. Box 581<br>Daly City, CA 94017       | 100                |   |                                    |
|                    | <br><br><input type="checkbox"/> Support <input type="checkbox"/> Oppose  | <input type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure            |  |                    |   |                                    |
| <b>SUBTOTAL \$</b> |   |  |  | 250                |   |                                    |

**Schedule D Summary**

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ 250
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ \_\_\_\_\_
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL** .. \$ 250

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

|                                 |            |                                |
|---------------------------------|------------|--------------------------------|
| Statement covers period         |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                            | 07/01/2016 |                                |
| through                         | 09/24/2016 | Page <u>17</u> of <u>20</u>    |
| NAME OF FILER                   |            | I.D. NUMBER                    |
| Sylvester for Daly City Council |            | 1387618                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Spotlight Printing<br>725 Bryant Street<br>San Francisco, CA 94107  | LIT  |    | Check                  | 319         |
| Spotlight Printing<br>725 Bryant Street<br>San Francisco, CA 94107  | LIT  |    | Check                  | 319         |
| Spotlight Printing<br>725 Bryant Street<br>San Francisco, CA 94107  | LIT  |    | Check                  | 212         |
| <b>SUBTOTAL \$</b>  |      |    |                        | <b>850</b>  |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**Schedule E Summary**

|   |                 |             |
|---|-----------------|-------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.).....   | \$              | 1850        |
| 2. Unitemized payments made this period of under \$100.....   | \$              | 196         |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....                   | \$              |             |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)..... | <b>TOTAL \$</b> | <b>2046</b> |

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|                                 |            |                                |
|---------------------------------|------------|--------------------------------|
| Statement covers period         |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                            | 07/01/2016 |                                |
| through                         | 09/24/2016 | Page <u>18</u> of <u>20</u>    |
| NAME OF FILER                   |            | I.D. NUMBER                    |
| Sylvester for Daly City Council |            | 1387618                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sylvester for Daly City Council

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| City of Daly City<br>333-90th Street<br>Daly City, CA 94015         | FIL  |    | Check                  | 1000        |
|   |      |    |                        |             |
|   |      |    |                        |             |
|   |      |    |                        |             |
|   |      |    |                        |             |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$ 1000**

**Schedule F  
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded  
to whole dollars.

|                                 |            |                             |
|---------------------------------|------------|-----------------------------|
| Statement covers period         |            | <b>CALIFORNIA FORM 460</b>  |
| from                            | 07/01/2016 |                             |
| through                         | 09/24/2016 | Page <u>19</u> of <u>20</u> |
| NAME OF FILER                   |            | I.D. NUMBER                 |
| Sylvester for Daly City Council |            | 1387618                     |

SEE INSTRUCTIONS ON REVERSE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)    | CODE OR DESCRIPTION OF PAYMENT | (a)<br>OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b)<br>AMOUNT INCURRED THIS PERIOD | (c)<br>AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) | (d)<br>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|---|--------------------------------|---|------------------------------------|---|--|
| Jade Dragon Restaurant<br>2368 Junipero Serra Blvd<br>Daly City, CA 94015 | FND                            |   | 749                                |   | 749  |
| Constant Contact<br>1601 Trapelo Rd #329<br>Waltham, MA 02451             | WEB                            |   | 156                                |   | 156  |
| Constant Contact<br>1601 Trapelo Rd #329<br>Waltham, MA 02451             | WEB                            |   | 195                                |   | 195  |
| <b>SUBTOTALS \$</b>   |                                |   | \$ 1100                            | \$  | \$ 1100  |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**Schedule F Summary**

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) ..... **INCURRED TOTALS \$** 4820
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ..... **PAID TOTALS \$** \_\_\_\_\_
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 4820  
May be a negative number

**Schedule F  
(Continuation Sheet)  
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded  
to whole dollars.

|  |                             |
|--|-----------------------------|
| Statement covers period<br>from <u>07/01/2016</u><br>through <u>09/24/2016</u> | <b>CALIFORNIA FORM 460</b>  |
|  | Page <u>20</u> of <u>20</u> |
| I.D. NUMBER<br>1387618   |                             |

NAME OF FILER  
Sylvester for Daly City Council

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  | CODE OR DESCRIPTION OF PAYMENT | (a)<br>OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b)<br>AMOUNT INCURRED THIS PERIOD | (c)<br>AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) | (d)<br>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|---|--------------------------------|---|------------------------------------|---|--|
| Kirk Briggs Signs<br>551 So. Yosemite Street<br>Oakdale, CA 95361       | CMP                            |   | 1046                               |   | 1046   |
| Kirk Briggs Signs<br>551 So. Yosemite Street<br>Oakdale, CA 95361       | CMP                            |   | 1749                               |   | 1749   |
| San Mateo Democratic Party<br>751 Laurel Street<br>San Carlos, CA 94070 | LIT                            |   | 450                                |   | 450  |
| San Mateo County Elections,<br>40 Tower Road<br>San Mateo, CA 94066     | POL                            |   | 125                                |   | 125  |
| <b>SUBTOTALS \$</b>   |                                |   | <b>\$ 3370</b>                     |   | <b>\$ 3370</b>                                     |